

**2023 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P05000073541

**Entity Name:** PARADISE BANK

**Current Principal Place of Business:**

2420 N FEDERAL HWY  
BOCA RATON, FL 33431

**Current Mailing Address:**

2420 N FEDERAL HWY  
BOCA RATON, FL 33431

**FEI Number:** 20-3037095

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

BURKE, WILLIAM J  
2420 N FEDERAL HWY  
BOCA RATON, FL 33431 US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.*

**SIGNATURE:** \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**Officer/Director Detail :**

Title DIRECTOR, CEO  
Name KELLOGG, WARD  
Address 2420 N FEDERAL HWY  
City-State-Zip: BOCA RATON FL 33431

Title DIRECTOR, PRESIDENT  
Name BURKE, WILLIAM J  
Address 2420 N FEDERAL HWY  
City-State-Zip: BOCA RATON FL 33431

Title DIRECTOR, EVP  
Name ENGLERT, DAVID W  
Address 2420 N FEDERAL HWY  
City-State-Zip: BOCA RATON FL 33431

Title DIRECTOR, EVP  
Name GAVIN, DENNIS W  
Address 2420 N FEDERAL HWY  
City-State-Zip: BOCA RATON FL 33431

Title DIRECTOR, EVP  
Name RAFFERTY, KEVIN  
Address 2420 N FEDERAL HWY  
City-State-Zip: BOCA RATON FL 33431

Title DIRECTOR, EVP  
Name SACKET, KEVIN M  
Address 2420 N FEDERAL HWY  
City-State-Zip: BOCA RATON FL 33431

Title DIRECTOR  
Name DICKENSON, DAVID B  
Address 2420 N FEDERAL HWY  
City-State-Zip: BOCA RATON FL 33431

Title DIRECTOR  
Name GOLDSMITH, HOWARD S  
Address 2420 N FEDERAL HWY  
City-State-Zip: BOCA RATON FL 33431

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*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** DENNIS GAVIN

EVP CCO

01/23/2023

\_\_\_\_\_ Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_ Date

**Officer/Director Detail Continued :**

Title DIRECTOR  
Name MCGEE, ALLEN D  
Address 2420 N FEDERAL HWY  
City-State-Zip: BOCA RATON FL 33431

Title DIRECTOR  
Name TONEY, G. ROBERT  
Address 2420 N FEDERAL HWY  
City-State-Zip: BOCA RATON FL 33431

Title DIRECTOR  
Name MCMURRAIN, THOMAS T  
Address 2420 N FEDERAL HWY  
City-State-Zip: BOCA RATON FL 33431

Title DIRECTOR  
Name WHEELER, LISA R  
Address 2420 N FEDERAL HWY  
City-State-Zip: BOCA RATON FL 33431